



EMPLOYEE REFERRAL FORM

Referring Employee

Name:

Hiring Date:

ID:

Email Address:

Current Position:

Department:

Contact Number:

❖ Have you previously referred any employee who had joined our team?

Yes

No

❖ If yes, please state his name & department

Name:

Department:

Referred Candidate Information

Name:

Address:

Contact Number:

Birth Date:

Current Employer:

Current Position Title:

Position title referred for:

❖ Is this candidate aware that you have referred their name? Yes No

❖ Had you worked with the referred candidate before? Yes No

❖ Would you be supervising this position? Yes No

❖ Why this referred candidate is qualified for the position?

❖ Please mention if you are aware by his current or expected salary.

